

TO - Tobacco Use

TO-C COMPLICATIONS

OUTCOME: The patient/family will understand the slow progression of disease and disability resulting from tobacco use and its effect on family members.

STANDARDS:

1. Discuss the common problems associated with tobacco use and the long term effects of continued use of tobacco, e.g., COPD, cardiovascular disease, dental disease, impotence, slower healing rate, placental insufficiency, low birth weight, and fetal demise, numerous kinds of cancers including lung cancer. **Refer to PN-TO.**
2. Discuss that tobacco use causes damage to the entire body and results in numerous chronic diseases, many of which are irreversible and debilitating.
3. Review the effects of tobacco use on all family members. e.g., financial burden, greater risk of fire, and early death.
4. Review the effects of second hand smoke and associated risks e.g., increased risk of SIDS, exacerbation of asthma, increased risk of infection, early death. **Refer to TO-SHS.**
5. Discuss, as appropriate, that tobacco mixed with any other substance may be more dangerous and may cause more complications. e.g., ash or other chemicals.

TO-CUL CULTURAL/SPIRITUAL ASPECTS OF HEALTH

OUTCOME: The patient/family will understand the impact and influences cultural and spiritual traditions, practices, and beliefs have on health and wellness.

STANDARDS:

1. Discuss the potential role of cultural/spiritual traditions, practices and beliefs in achieving and maintaining health and wellness. Explain that differences exist between spiritual tobacco use and tobacco abuse and addiction.
2. Explain that traditional medicines/treatments should be reviewed with the healthcare provider to determine if there are interactions with prescribed treatment.
3. Refer to clergy services, traditional healers, or other culturally appropriate resources.

TO-DP DISEASE PROCESS

OUTCOME: The patient/family will understand the slow progression of disease and disability associated with tobacco use.

STANDARDS:

1. Review the current factual information regarding tobacco use. Explain that tobacco use in any form is dangerous. **Refer to TO-C.**
2. Explain nicotine addiction. Discuss that nicotine is rapidly addictive and an exceedingly difficult addiction to break.
3. Explain that most patients require 5-7 attempts to stop tobacco use for life.

TO-EX EXERCISE

OUTCOME: The patient/family will understand the role of increased physical activity in this patient's disease process and will make a plan to increase regular activity by an agreed-upon amount.

STANDARDS:

1. Discuss medical clearance issues for physical activity.
2. Discuss the benefits of any exercise, such as improvement in well being, stress reduction, sleep, bowel regulation, and self image.
3. Discuss obstacles to a personal exercise plan and solutions to those obstacles. Assist the patient in developing a personal exercise plan.
4. Encourage the patient to increase the intensity and duration of the activity as the patient becomes more fit.
5. Refer to community resources as appropriate.

TO-FU FOLLOW-UP

OUTCOME: The patient/family will understand the importance of follow-up in the treatment of nicotine addiction.

STANDARDS:

1. Discuss the importance of follow-up care.
2. Discuss the procedure for obtaining follow-up appointments and that follow-up appointments should be kept.
3. Emphasize that full participation of the treatment plan is the responsibility of the patient/family.
4. Discuss signs/symptoms that should prompt immediate follow-up.
5. Discuss the availability of community resources and support services and refer as appropriate.

TO-HY HYGIENE

OUTCOME: The patient/family will understand hygiene as it applies to tobacco use.

STANDARDS:

1. Discuss hygiene as part of a positive self image.
2. Review bathing, dental hygiene, and laundry/house cleaning (to reduce tobacco residue/odor).

TO-IR INFORMATION AND REFERRAL

OUTCOME: The patient/family will understand the process of referral and treatment for nicotine dependence.

STANDARDS:

1. Discuss sources for tobacco cessation treatment.
2. Refer to nicotine treatment program or other resource as available.

TO-L LITERATURE

OUTCOME: The patient/family will receive literature about tobacco use or cessation.

STANDARDS:

1. Provide the patient/family with literature on tobacco use or cessation.
2. Discuss the content of the literature.

TO-LA LIFESTYLE ADAPTATIONS

OUTCOME: The patient/family will see tobacco abstinence as a way of life.

STANDARDS:

1. Discuss the patient's use/abuse of tobacco.
2. Discuss tips for stress relief and "healthy replacement habits."

TO-M MEDICATIONS

OUTCOME: The patient/family will understand the purpose, proper use, and expected outcomes of prescribed drug therapy.

STANDARDS:

1. Describe the name, strength, purpose, dosing directions, and storage of the medication.
 - a. Explain that medications can help only if the patient is ready to quit and that medications work best in conjunction with counseling and lifestyle-modification education.

- b. Explain that some medications may not work right away but will require a few days to a few weeks to take effect.
2. Discuss the risks, benefits, and common or important side effects of the medication and follow up as appropriate.
3. Discuss any significant drug/drug, drug/food, and alcohol interactions, as appropriate.
4. Discuss the importance of keeping a list of all current prescriptions and over-the-counter medicines, vitamins, herbs, traditional remedies, and supplements. Encourage the patient to bring this list and pill bottles to appointments for medication reconciliation.

TO-MNT MEDICAL NUTRITION THERAPY

OUTCOME: The patient/family will understand the specific nutritional intervention(s) needed in tobacco use.

STANDARDS:

1. Explain that Medical Nutrition Therapy (MNT) is a systematic nutrition care process provided by a Registered Dietitian (RD) that consists of the following:
 - a. Assessment of the nutrition related condition.
 - b. Identification of the patient's nutritional problem.
 - c. Identification of a specific nutrition intervention therapy plan.
 - d. Evaluation of the patient's nutritional care outcomes.
 - e. Reassessment as needed.
2. Review the basic nutrition recommendations for the treatment plan.
3. Discuss the benefits of nutrition and exercise to health and well-being.
4. Assist the patient/family in developing an appropriate nutrition care plan.
5. Refer to other providers or community resources as needed.

TO-N NUTRITION

OUTCOME: The patient/family will understand the role of nutrition and tobacco use.

STANDARDS:

1. Explain the importance of healthy eating habits and for optimal health.
2. Explain that vitamin C requirements are higher for smokers. Vitamin C sources include, citrus fruits, strawberries, cantaloupe, spinach.
3. Refer to a registered dietitian for MNT as needed.

TO-P PREVENTION

OUTCOME: The patient/family will understand tobacco use prevention.

STANDARDS:

1. Discuss risk factors for tobacco use, e.g., parents/family/friends who use tobacco, peer/social pressure, stress, environments that are conducive to use of tobacco (bars, casinos, rodeos), availability of cigarettes.
2. Discuss methods (as appropriate to this patient) to avoid ever using tobacco.

TO-QT QUIT

OUTCOME: The patient/family will understand that tobacco cessation will improve quality of life. use is a serious health threat, may be more motivated to quit, and that cessation will benefit health and how participation in a support program may prevent relapse.

STANDARDS:

1. Advise the patient to quit.
2. Discuss that readiness and personal motivation are key components to quitting.
3. Review the treatment, medication, and support options available to the patient/family. Make referrals as appropriate. **Refer to TO-IR.**
4. Review the value of frequent follow up and support during the first months of cessation.

TO-S SAFETY

OUTCOME: The patient/family will understand safety issues as they apply tobacco use.

STANDARDS:

1. Discuss that smoking in bed or falling asleep while smoking greatly increases the risk of house fires. Emphasize to never smoke while in bed or if sleepy.
2. Discuss the risk of cigarette burns.
3. Discuss that smoking while driving is a distraction and increases the risk of motor vehicle crash.

TO-SHS SECOND-HAND SMOKE

OUTCOME: The patient/family will understand the adverse health consequences associated with exposure to second-hand tobacco smoke.

STANDARDS:

1. Define “passive smoking” and ways in which exposure occurs, e.g., smoldering tobacco, exhaled smoke, residue in carpet.
2. Discuss harmful substances in smoke e.g., nicotine, benzene, CO, carcinogens
3. Explain the increased risk of illness in children and adults when exposed to tobacco smoke, e.g., increased colds, asthma, ear infections, pneumonia, lung cancer.
4. Emphasize that the infants who are exposed to smoke in the home are three times more likely to die of SIDS than infants who live in a non-smoker’s home.
5. Explain that cigarette smoke trapped in carpets, upholstery, and clothing still increases the risk of illness.
6. Discuss that having household members smoke outside and removing smoke contaminated clothing may decrease exposure to second hand smoke.
7. Encourage smoking cessation or at least never smoking in the home or car. **Refer to TO-QT.**

TO-SM STRESS MANAGEMENT

OUTCOME: The patient will understand the role of stress management in tobacco abuse and its positive effect on tobacco cessation.

STANDARDS:

1. Discuss that uncontrolled stress may increase tobacco use and interfere with tobacco cessation.
2. Discuss that uncontrolled stress may exacerbate adverse health behaviors such as increased alcohol or other substance use, all of which can increase tobacco use and interfere with tobacco cessation.
3. Discuss various stress management strategies which may help maintain a healthy lifestyle. Examples may include:
 - a. Becoming aware of your own reactions to stress
 - b. Recognizing and accepting your limits
 - c. Talking with people you trust about your worries or problems
 - d. Setting realistic goals
 - e. Getting enough sleep
 - f. Maintaining a healthy diet
 - g. Exercising regularly
 - h. Taking vacations
 - i. Practicing meditation, self-hypnosis, and positive imagery

- j. Practicing physical relaxation methods such as deep breathing or progressive muscular relaxation
 - k. Participating in spiritual or cultural activities
4. Provide referrals as appropriate.